

# Quality Payment Program Reporting for Beginners

## Transcript from Live Session

Tuesday, May 12, 2020



Julie Williams:

Good morning. Welcome to today's presentation. I'm Julie Williams with Quality Insights, QPP support team. And today, along with my associates, Roxanne Fletcher and Lisa Sagwitz, we plan to introduce you to the Quality Payment Program, explore CMS' Quality Payment Program website, explore the Quality Insights QPP support website and identify how you can get free assistance.

Julie Williams:

Today, you are in listen only mode. Should you have any questions during today's presentation, which we hope you do, please type them into the Q&A box at the bottom right of your screen and a member of our team will get back with you. Today, I'd like to start off by going to the [qpp.cms.gov](http://qpp.cms.gov) website.

Julie Williams:

As you see there are four tabs going across the top of the page. The MIPS tabs will be our main focus today. First, let me bring you to the alert window here. In this alert window, Medicare will put out any pertinent information that they feel that you really need to see. This message just states that the 2019 performance window has closed, and your final feedback score will be this summer.

Julie Williams:

As we go a little bit further, it explains that this site will let you explore the four phases of participation: collect data, report data, feedback available, and payment adjustments. It's a lot of work, but don't forget, we're not asking you to do it alone. If you're in a small, underserved, or rural practice, there's support at no cost. All you have to do is select your state and your Medicare contractor will come up. Quality Insights provides support for West Virginia, New Jersey, Pennsylvania, and Delaware.

Julie Williams:

Feel free to put any information in the chat if you'd like us to reach out. Medicare will provide featured resources. This one today says group and individual data submission for MIPS. You'll also find more videos, reference documents, training materials, and they can be found under the About tab, or here under Help and Support.

Julie Williams:

Here, you will actually see the 2018 QPP Access User Guide. If you click on this, it'll bring you to a 2020 zip file with step-by-step instructions on how to obtain a HARP account. What's a HARP account, you say? Well, it was formerly known as an EIDM account. It actually contains and provides information on how Medicare sees you. You can report your data, collect your data, and submit your data, get your feedback and your positive or negative adjustment in your HARP account.

Julie Williams:

Next, we'd like to go in. And the first thing that we would do if we were working with someone is ask them to go in and check their participation status. This is rather important. And for example purposes only, we're going to use this NPI number. So we're going to check this particular doctor's NPI number.

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And the first thing that you'll notice is that another alert box comes up. It says the eligibility status for the performance year 2020. Your participation status could change within the year, so it's really important that you go in there randomly and check that out.

Julie Williams:

Now, we'll go down and look at our provider. As you'll see, this provider is just associated with one tax ID number – Christiana Care Health Services Inc. He's not required to report as an individual. He can report as a group and he is in an APM. Another bit of information that we'd like to share is that opt-in ability. If you did have that opt-in ability, it would state that. This doctor does not have that ability.

Julie Williams:

So we're going to expand and talk a little bit more about how this doctor is seen by Medicare. So he doesn't exceed the low-volume threshold, which means he does not exceed 200 Medicare patients. He does not exceed 90,000 in allowable charges, and he does not exceed 200 covered services. He is in an APM with Christiana Care Partners. ACO is a Medicare shared savings program.

Julie Williams:

On the clinician level, he's considered hospital-based and non-patient facing. On the practice level, he's considered hospital-based. Now, you can click here to see how other reporting factors are determined, but it is determined on your claims and your place of service and different things like that as you report. But what this tells me, the first thing is he's not eligible for the free support, because if he was, small practice would also be one of the reporting factors for him.

Julie Williams:

But, what do his factors mean? Let's go back. Under MIPS, if you go here under Special Statuses Reporting Factors, it's going to bring you up to the 2020 special statuses, and it's going to talk about your special statuses. As you see, there's quite a few here. The hospital-based and non-patient facing, but for our demonstration, let's go and look at small practices.

Julie Williams:

As a small practice, it states that you earn twice the points for Improvement Activities. And if you submit one quality measure, you're going to receive six bonus points in the Quality performance category. And a small practice means that you have 15 or fewer clinicians that bill under your tax ID number.

Julie Williams:

Now, what I'd like to do is go under and talk about the performance category requirements. It's going to bring us to 2020. We're going to go and explore those measures. But those performance categories are Quality, Promoting Interoperability, Improvement Activities, and Cost Measures. Now, one thing I want you to remember is that you do not have to have electronic health records to participate in this program.

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Julie Williams:

So now, let's explore those measures. The first one we're going to go to, and I want you to also note you can select any of the previous years, but we are going to stay in 2020. We're going to go to Quality and look. Quality is worth 45% of your final score, but this can change due to special statuses and hardships. What would this mean to you? Let's do that one-on-one with you and talk about a plan for you. It's going to give you several resources here for scoring. And it also gives you the option to filter. You can go to your specialty set and your collection type. As you can see, there are multiple ways for collection.

Julie Williams:

Another really important factor that I always like to show is, under the collection type, either one, there's a specification sheet. That sheet is going to give you examples, age of the patient that you're going to report on, maybe a diagnosis, how often you need to report, if it's associated with an office visit, or a diagnosis code, it's going to actually share the reporting CPT codes with you. If you are doing claims based, this is a great resource. So those are, again, things that we can help you determine and help figure out which quality measures are best for you and make it easier on your workflow.

Julie Williams:

We're going to go back to the top of the page again, and now we're going to talk about Promoting Interoperability. Promoting Interoperability is worth 25% of your final score. This can also change due to special statuses and hardships, and it has to be reported for 90 continuous days during 2020. Just like quality measures, it also has specification sheets on certain topics. And it'll also explain each exclusion. When you are reporting, there'll be different exclusions for the same question. So you want to make sure to select the right ones for you. Also, with this, you do have to perform a privacy and security risk assessment, and you also have to be using a 2015 certified electronic health record.

Julie Williams:

Now, let's talk about Improvement Activities. Improvement Activities, it's the easy one. There's 106 to choose from. There's something in there for everyone. This can be reported for a 90 day continuous period, and it is worth 15% of your final score. Get credit for some work that you're already doing. And again, we can help you choose those.

Julie Williams:

Cost is another category. Cost is something that you don't submit any data for. That's something that Medicare actually calculates for you. You can read through the cost information, and if you have any questions about how it pertains to you, reach out to us and we'll explain that to you.

Julie Williams:

Now, I'd like to go to the top again and talk about APMs. There's information on an APM overview. If you're not in an APM and are interested in one, don't hesitate to reach out. We'll be glad to talk you through that and talk about what it means to you.

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Julie Williams:

The About tab has all of the resources. It has the resource library. It also has timelines and important deadlines, eligibility, determination dates, and the snapshots of when they're looking at those. It's a great resource area.

Julie Williams:

The Assignment tab is where you would sign in for your HARP account. And again, if you don't have a HARP account, we recommend everyone get a HARP account. It's the place where Medicare actually puts your eligibility, tells you how they look at you, the tax IDs, the doctors associated with you. Any corrections that need to be made can be done in the PECOS account, because that's where they're getting that information. It keeps on file your feedback score and your positive and negative adjustments.

Julie Williams:

Instead of going to that first page, you can also access step-by-step instructions here. And again, if you need help setting that up, don't hesitate to call us, or there's also the Medicare toll-free number here that you can access for questions.

Julie Williams:

Now, I want to get back to our slides. All right. So don't forget, we're here to help, free support if you're a small practice, check your participation status, know what that eligibility screen means to you. Create a plan, whether you have an EHR, or you're on paper charts, it's important. Create that audit file, start saving documents. And get started. Make sure you have that HARP account, get logged in, check it for accuracy and make any corrections needed in your PECOS account.

Julie Williams:

Now on the 2020 performance year – you need to obtain 45 points just to get a neutral payment adjustment. If you'd like just to talk about support on helping boost that score, we're here to help. Now, I'm going to turn things over to Roxanne.

Roxanne Fletcher:

Good morning, everyone. Thank you, Julie, for such a great review of the QPP website. I always learn something new when I review that.

Roxanne Fletcher:

Now, what I'd like to do is take a few minutes to share the Quality Insights support website. And on that website, we have a resource library offering access to customized tools, links, videos, information that you can access any time. We also have events, and so we'll look first at the calendar with current events and upcoming events. And then we have archived events, with our past webinars or QPPLive! sessions.

And we did set up a special website for COVID-19. And this will offer you up-to-date information that we've gotten from CMS and some tools that we've organized for you. So let's go there now.

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Roxanne Fletcher:

All right, here we are. So what I'd like to do now, let's start with the events. And as you can see, when I scroll down it gives us this month's calendar, and that is what we're doing today, Quality Payment Program Reporting for Beginners. And then on the 21st, the third Thursday of every month, we have our QPPLive!, which is a great event to attend. Especially if you're new to this MIPS thing, it gives you an opportunity to listen to other practices. There are questions on what they've been doing with MIPS. We provide up-to-date information. We usually start with providing you with the latest updates from CMS, things that would be happening with COVID-19. So it's a great resource to get concise information in an easy format.

Roxanne Fletcher:

Now, I'm going to go and show you the archived events. And so for the archived events, you can see our Quality Reporting Program for Beginners webinar. You can see that it's already been posted. The PowerPoint you can access here, or the slides, the recording when it's completed, and a transcript of everything that's been said during this webinar. And then we have past events. If you are a practice that uses paper, you may be interested in looking at this webinar that we held back in February, on Medicare Part B Claims. It's a very great resource. And again, we will be available to help you with any questions you have.

Roxanne Fletcher:

Next I'd like to direct you to our QPP resources. There are different types that you can select. There are different years, and let's go right to 2020. And there's some great tools here. As you can see, we have links that will take you out to CMS websites. We also have telehealth information. There are a couple of things that I wanted to point out, which are great resources. And that is this 2020 Quality Measures by Submission Methods, especially if you're a newer practice, or a newer person working in the MIPS, this breaks down reporting. If you're doing it by EHR, if you're doing it by claims, or if you're doing it by registry.

Roxanne Fletcher:

It gives you a snapshot of those quality measures that were available in that type of reporting method. So you're not looking through all of them and wondering which ones you can select. That's a big help. We've also pulled together some telehealth tips for you as well in here. So you can go in, just to see what might be of interest to you. We've set up different worksheets so you don't have to reinvent the wheel.

Roxanne Fletcher:

Now I'd like to take you to this COVID-19 awareness section. This is something that we set up for this epidemic that's been happening, to give you resources that will be at your fingertips. At first, when you open up the page, you'll see different websites that you can link to, that would have information from these different organizations about the COVID-19 and what's happening. We've also, on this left hand column, organized things in different categories so you can see what's of particular interest to you.

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Roxanne Fletcher:

Of course, right now everyone's in this telehealth mode. And I'd like to just go out to that website for you. So we pulled together various resources here. As you can see, anything that we've done, that we've pulled together for you, we have Quality Insights and the date that it was revised. And if we've posted other information from other organizations, we've tried to include the date that it was posted. And then if it's been updated, we try to keep this up to date. As we get information, we have someone specifically to go in and post that information for you.

Roxanne Fletcher:

Real quick, I'd like to show you this Telehealth Tips. It tells you a little bit about it, the service, what it does, who can provide it. And then of course one of the big things we hear from practices is how do we code, or get paid for it? This *How Do I Bill and Get Paid for Telehealth?* includes the modifiers. Then we provided a list of services. And if it's just temporary, while the COVID-19 epidemic's going on. If audio is the only way that you can bill for this. So we've put this together to kind of give you a quick review of the codes that you can use in your billing.

Roxanne Fletcher:

Okay. So now we will go back to this website, and I wanted to thank everybody for participating today. And just remember, I know you've been given a lot of information today, but we are here to help and I'm going to pass it now to Lisa, for her to wrap this up.

Lisa Sagwitz:

Thanks Roxanne. So summarizing what Julie and Roxanne have talked about, the important message is that Quality Insights is here to help you. Whether it's today, next week, anytime this year, or when you're ready to attest, we're happy to help you.

Lisa Sagwitz:

Your HARP account will get you greater access to information about your practice and that's available through the website [qpp.cms.gov](http://qpp.cms.gov) with sign in and two steps to setting up your HARP account. The first one is to set yourself up as a user. And step two is to connect to your practice. Now, even without your HARP account, after today's call, you could go to the Medicare, or the CMS website, [qpp.cms.gov](http://qpp.cms.gov), and either under the MIPS tab or the APM tab, look for the drop down that says, "Check participation status." By entering your provider's NPI number that will give you a look into whether quality payment program attesting needs to be done for 2020.

Lisa Sagwitz:

When you talk with us, we will ask you, "What is it that you want to accomplish? Are you looking to just get 45 points and stay neutral with the program? Or do you want to do exceptionally well and get some of the bonus money that's available?" We'll also help you determine what you can accomplish. Are you on paper charts? Are you on an EHR? And we'll take you in the right direction.

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Lisa Sagwitz:

We can also help you select quality measures that will work for your practice. And if you're interested, teach you how to improve those performance rates. But again, the important message is that Quality Insights is here to help you whenever you need us. And now we'll wrap up today's webinar. April will be giving you the closing slides and information on how to contact us.

April Faulkner:

Thanks Lisa. So everyone, if you have any questions about today's presentation, please enter those in the Q&A box. A member of our team will follow up with you individually to provide an answer. And I'd also like to thank Julie, Roxanne and Lisa for sharing this informative presentation. Thanks to everyone for joining us today. Please note that when you do close out of today's session, you will automatically be directed to a very brief evaluation. We ask that you take just a moment to complete it. We greatly appreciate your feedback and comments.

April Faulkner:

Also, as Roxanne mentioned, the next edition of QPP Live will be held on Thursday, May 21 at 9:30 a.m. I have posted a registration link to that event in the chat box. We do hope that you can join us. And again, thanks for joining us today and have a great rest of the day. The session has now concluded.



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